

HOUSE BILL REPORT

SSB 5492

As Passed House - Amended:

April 7, 2005

Title: An act relating to hospital reporting of restrictions on health care practitioners.

Brief Description: Modifying hospital reporting of restrictions on health care practitioners.

Sponsors: By Senate Committee on Health & Long-Term Care (originally sponsored by Senators Keiser, Deccio, Kline, Parlette, Mulliken and Pflug; by request of Department of Health).

Brief History:

Committee Activity:

Health Care: 3/29/05, 3/31/05 [DPA].

Floor Activity:

Passed House - Amended: 4/7/05, 96-0.

Brief Summary of Substitute Bill (As Amended by House)

- Expands requirements for hospitals to report to the state any actions that restrict or terminate a physician's clinical privileges to apply to actions that restrict or terminate the practice of other health care providers.

HOUSE COMMITTEE ON HEALTH CARE

Majority Report: Do pass as amended. Signed by 9 members: Representatives Cody, Chair; Campbell, Vice Chair; Morrell, Vice Chair; Bailey, Ranking Minority Member; Clibborn, Green, Hinkle, Lantz and Moeller.

Minority Report: Without recommendation. Signed by 4 members: Representatives Curtis, Assistant Ranking Minority Member; Alexander, Appleton and Schual-Berke.

Staff: Chris Blake (786-7392).

Background:

Hospitals are required to report to certain state or federal government agencies when they take specific actions to restrict or terminate some health care providers' licenses. In Washington, when a hospital terminates or restricts the clinical privileges of a physician because of his or her commission of any act of unprofessional conduct, it must notify the Medical Quality Assurance Commission within 60 days of the action.

Nationally, hospitals and other health care entities must report any professional review actions that adversely affect a physician's or dentist's clinical privileges to the National Practitioner Data Bank (NPDB). Hospitals also have the option of reporting to the NPDB when any adverse actions are taken against the clinical privileges of health care providers other than physicians and dentists. Reports must be made to the NPDB within 15 days from the date that the action was taken.

Summary of Amended Bill:

The requirement that hospitals report to the Medical Quality Assurance Commission the restriction or termination of a physician's privileges due to the commission of an act of unprofessional conduct is broadened to include additional categories of health care providers. The broader requirements direct hospitals to report to the Department of Health (Department) when the practice of a health care provider is restricted, suspended, limited, or terminated due to the commission of an act of unprofessional conduct, or if it is voluntarily or involuntarily restricted or terminated to avoid action by a hospital.

The health care professions that are subject to the reports are: pharmacists, advanced registered nurse practitioners, dentists, naturopaths, optometrists, osteopathic physicians and surgeons, osteopathic physician assistants, physicians, physician assistants, podiatrists, and psychologists.

The time for a hospital to report to the Department is reduced from 60 days to 15 days. A hospital, hospital administrator, or hospital executive officer that files a report in good faith is immune from liability related to the report. If the presence of good faith is challenged, the prevailing party may recover litigation costs, including reasonable attorney's fees. The Department must notify the reporting hospital of the disciplining authority's case disposition decision. The Department may not raise hospital license fees to pay for the program prior to July 2007.

Appropriation: None.

Fiscal Note: Available.

Effective Date of Amended Bill: The bill takes effect 90 days after adjournment of session in which bill is passed.

Testimony For: (In support) This bill improves upon quality improvement processes and enhances patient safety by requiring hospitals to report to the Department of Health after an internal investigation by the hospital has determined that an individual practitioner's practice needs to be reviewed by the Department of Health.

(With concerns) The absolute immunity provisions of the bill should have a good faith requirement which rarely applies to the private sector and should not be applied to an entity

that is simply performing a reporting function. While reports are generally made in good faith, there are occasions when this can happen as a result of bad faith.

(Neutral) Current laws regarding reporting the unprofessional conduct of certain health care providers already have absolute immunity for reporting and those reporting requirements should be consistent. The group of providers covered by the bill are those with prescriptive authority or admitting privileges and nurses should not be included. Hospitals already have specific regulations for reporting to the Nursing Commission.

Testimony Against: None.

Persons Testifying: (In support) Laurie Jenkins, Department of Health.

(With concerns) Andy Dolan, Washington State Medical Association; and Martin Ziontz, Washington State Podiatric Medical Association.

(Neutral) Lisa Thatcher, Washington State Hospital Association.

Persons Signed In To Testify But Not Testifying: (Neutral) Taya Briley, Washington State Hospital Association.